

UNIVERSITY OF LONDON.

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EXAMINATION

FOR THE DEGREE OF

DOCTOR OF MEDICINE

IN THE YEAR 1842.



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LONDON:

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EXAMINERS.

*Elements of Intellectual Philosophy, Logic, and  
Moral Philosophy.*

REV. HENRY ALFORD, M.A.  
THOMAS B. BURCHAM, Esq., M.A.

*Surgery.*

JOHN BACOT, Esq.  
SIR STEPHEN LOVE HAMMICK, Bart.

*Medicine.*

ARCHIBALD BILLING, M.D.  
ALEXANDER TWEEDIE, M.D., F.R.S.

*Midwifery.*

EDWARD RIGBY, M.D.

GOLD MEDALS, AND CERTIFICATES OF  
SPECIAL PROFICIENCY.

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GOLD MEDALS.

*For a Commentary on a Case in Medicine.*

1839. JOHN TAYLOR..... Medical Schools, &c.  
University College.  
1842. RICHARD QUAIN ..... University College.

*In Medicine.*

1841. FREDERICK WM. MACKENZIE . University College.  
1842. RICHARD QUAIN ..... University College.

*In Midwifery.*

1841. JONATHAN MASON WADDY .. Guy's & St. Thomas's.

CERTIFICATES OF SPECIAL PROFICIENCY.

*In Medicine.*

1839. JOHN TAYLOR..... University College.  
1841. WILLIAM MARTEN COOKE... Webb Street.  
FREDERICK WM. MACKENZIE University College.  
1842. WILLIAM ALLEN MILLER.... King's College.  
RICHARD QUAIN..... University College.

# PASS EXAMINATION.

MONDAY, November 28.—MORNING, 10 to 1.

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## ELEMENTS OF INTELLECTUAL PHILOSOPHY, LOGIC, AND MORAL PHILOSOPHY\*.

*Examiners*, Mr. BURCHAM and Rev. H. ALFORD.

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1. WHAT are ideas, according to Locke? What is the right method of treating of them, in an empirical treatise on human understanding? What has been Locke's fundamental error in this point? What has been its effect on his system, and his school?

2. Translate and explain: "1°. L'idée de corps est une idée contingente et relative, tandis que l'idée d'espace est une idée nécessaire et absolue: 2°. l'idée de corps implique l'idée de limite, et l'idée d'espace implique l'absence de toute limite: 3°. enfin, l'idée de corps est une représentation sensible, et l'idée d'espace est une conception pure et toute rationnelle."—p. 138.

Explain the logical and chronological interdepend-

\* The following Works have been selected for the Examination in Logic, Moral, and Intellectual Philosophy, for the Degree of DOCTOR OF MEDICINE in the year 1843:

*Logic*.—Bacon's *Novum Organum*, Part I.

*Philosophy of the Mind*.—Cousin's Analysis of Locke's Essay (being the 3rd volume of his *Cours de Philosophie*).

*Moral Philosophy*.—Butler's *Analogy*, Part I. Stewart's *Outlines of Moral Philosophy*.

ency of these ideas: show how Locke has confounded these conditions, and why.

3. “Locke confond constamment l’ordre d’acquisition de nos connaissances avec leur ordre logique, et l’antécédent nécessaire d’une idée avec cette idée même.”

Exemplify this in his account of the ideas of time, infinity, personal identity, and substance.

4. “L’utilité même de la peine repose sur la justice, loin que la justice repose sur l’utilité de la peine.”

Expand this assertion; and state Locke’s account of this matter.

5. “When the understanding is once stored with simple ideas, it has the power to repeat, compare, and unite them; and so can make at pleasure complex ideas.”—*Locke*, Book II. c. 2.

Show that the natural process of the mind is the reverse of this.

6. Give the substance of Cousin’s remarks on the third book of Locke’s *Essay* (of words, or language in general).

7. State the three objections to Locke’s theory of knowledge and judgment, and their grounds.

8. Give Locke’s remarks on syllogistic reasoning, and Cousin’s criticism on them.

9. What are the tendencies of Locke’s theories on personal liberty, on the nature of the soul, and on the existence of God? What is Cousin’s general judgment of the merits and faults of the *Essay* concerning Human Understanding? Who have been the most celebrated followers of Locke, and for what has each been distinguished?

10. What does Bacon propose to himself in his *Logic*? and what is his judgment of former writers? Does it appear to you to be just?

11. Give an account of, and subdivide, those false notions which Lord Bacon designates “Idols of the Tribe.” Exemplify “Idols of the Market.”

12. “Nor is it a less misfortune, that men, in their philosophies and contemplations, bestow their time in discovering and treating the ultimate principles, or last resorts of nature;

whereas all utility, and power of acting, lies in the midway.”  
—*Aphor.* 66.

Give instances of this fault in philosophical theories.

13. Upon what grounds does Stewart contend that the desire of esteem is an original principle of our nature? What are the arguments adduced to show that it is resolvable into the association of ideas?

14. Give the substance of Clarke’s argument to prove the existence of a Deity. What metaphysical axioms are assumed therein? What is meant by the *à priori*, and what by the *à posteriori* argument?

15. Give a short account of Condillac’s theory. Is there any, and if so, what real difference, between his doctrine and that of Locke with respect to the origin of our ideas? How, according to Locke, do we get our ideas of cause and effect? Give any other solution of the question.

*MONDAY, November 28.—AFTERNOON, 3 to 6.*

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COMMENTARY ON A CASE IN MEDICINE,  
SURGERY, OR MIDWIFERY.  
CELSUS *DE RE MEDICA*.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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CASE.

A man twenty-five years of age, who had previously enjoyed good health, suddenly complained of violent palpitations of the heart with difficulty of breathing and fever. He was bled several times, by which and other measures the palpitation ceased, and the dyspnoea was so much relieved, that he voluntarily left the hospital. Some time afterwards he again applied for admission. He did not then complain of palpitation, and could lie in any position: auscultation detected only extreme frequency in the action of the heart, but no pulmonary lesion: the pulse was 140, regular, and of the ordinary strength: the skin was cool, the lower extremities slightly infiltrated: the abdomen soon began to enlarge, the face became œdematous, the breathing embarrassed, and the infiltration of the extremities and ascites increased. On percussing the thorax, the posterior part of the left side of the chest emitted a dull sound, and over this space the respiratory murmur was absent. From this period the strength rapidly declined, diarrhoea supervened, and he died a few days afterwards.

What was the nature of this disease? What morbid appearances would you expect to find? Detail the treatment you would have adopted.



## CELSUS.

Alterius quoque visceris morbus, id est jecinoris, æquè modò longus, modò acutus esse consuevit: *ἡπατικὸν* Græci vocant. Dextrâ parte sub præcordiis vehemens dolor est; idemque ad latus dextrum et ad jugulum humerumque partis ejusdem pervenit: nonnunquàm manus quoque dextra torquetur: horror validus est. Ubi malè est, bilis evomitur; interdùm singultus propè strangulat. Et hæc quidem acuti morbi sunt: longioris verò, ubi suppuratio in jecinore est, dolorque modò finitur, modò intenditur, dextrâ parte præcordia dura sunt et tument: post cibum major spiritûs difficultas est; accedit maxillarum quædam resolutio. Ubi inveteravit malum, venter et crura pedesque intumescunt; pectus atque humeri, circaque jugulum utrumque extenuatur. Initio sanguinem mittere optimum est: tùm venter solvendus est, si non potest aliter, per nigrum veratrum. Imponenda extrinsecùs cataplasmata; primùm quæ reprimant, deindè calida quæ diducant; quibus rectè iris vel absinthium adjicitur: post hæc malagma. Dandæ verò sorbitiones sunt, omnesque cibi et calidi, et qui non multùm alunt, et ferè qui pulmonis quoque dolori conveniunt; præterque eos qui urinam movent, potionesque ad id efficaces. Utilia in hoc morbo sunt thymum, saturèia, hyssopum, nepeta, amyllum, sesamum, lauri baccæ, pini flos, herba sanguinalis, mentha, ex malo cotoneo medium, columbæ jecur recens et crudum. Ex quibus quædam per se esse, quædam adjicere vel sorbitioni vel potioni licet: sic tamen ut parcè assumantur. Neque alienum est, absinthium contritum ex melle et pipere, ejusque catapotium quotidie devorare. Abstinentum utique est ab omnibus frigidis: neque enim res ulla magis jecur lædit. Frictionibus utendum in extremis partibus: vitandus omnis labor, omnis vehementior motus: ne spiritus quidem diutiùs continendus est. Ira, trepidatio, pondus, ictus, cursus, inimica sunt. Perfusio corporis multâ prodest ex aquâ; si hiems est, calidâ; si æstas, tepidâ: item liberalis unctio, et in balneo sudor. Si verò jecur vomicâ laborat, eadem facienda sunt quæ in cæteris interioribus suppurationibus: quidam etiam contra id scalpello aperiunt, et ipsam vomicam adurunt. (Lib. IV. Cap. viii.)

*TUESDAY, November 29.*

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MEDICINE.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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*MORNING 10 to 1.*

1. What conclusions are to be drawn, in the present state of pathological knowledge, from the presence of albumen in the urine?

2. Describe the anatomical characters, and physical signs of pneumonia. Give an outline of the treatment to be adopted in its several stages.

3. Detail the symptoms, anatomical characters, and treatment of peritonitis.

4. Mention the more remote affections incident to the process of dentition, and the treatment applicable to each.

*AFTERNOON, 3 to 6.*

1. What are the more frequent complications of hooping cough? Mention the symptoms by which they may be recognized. Sketch the treatment of the disease, including that adapted to the complicated forms.

2. Describe the symptoms and treatment of delirium tremens.

3. Give the symptoms, diagnosis and progress of inflammation of the cæcum.

4. Mention the different forms of gravel, and the treatment, remedial and dietetic, applicable to each.

*FRIDAY, December 2, at 10 A.M.*

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EXAMINATION ON THE ANSWERS TO THE  
PRINTED PAPERS, AND ON THE COMMEN-  
TARIES.

By Vivâ Voce Interrogation.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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EXAMINATION FOR HONOURS.



# EXAMINATION FOR HONOURS.

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*TUESDAY, December 6.*

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## SURGERY.

*Examiners, Mr. BACOT and Sir STEPHEN HAMMICK.*

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*MORNING, 10 to 1.*

WHAT constitutes a Hernia? Describe an Inguinal, a Femoral, an Umbilical, a Ventral, a Pudendal, and a Congenital Rupture: give the anatomical structure and formation of the openings through which the above Herniæ protrude. What makes the difference between a reducible, an irreducible, and a strangulated rupture? Note the diseases with which they are sometimes unfortunately confounded, and how such mistakes are to be avoided. How do you know whether the contents of the hernial sac be omentum, intestine, or both? and would that knowledge make any difference in your treatment or prognostic? You will detail the management of each of the above-named Herniæ respectively, under their several conditions of reducible or otherwise; give at length the treatment in every stage likely to arise in the various Herniæ whilst in a state of strangulation, till they are reduced or you have decided on an operation; if the latter give your reasons, particularly remarking whether your decision has been formed by the length of time that the rupture has been strangulated, or from the violence of the symptoms; if the former, what length of time? if the latter, what are the peculiar symptoms on which you rest?

*AFTERNOON, 3 to 6.*

As you have detailed in the paper of this morning the treatment of the various Herniæ whilst in a state of strangulation, you are now desired to describe very fully the method of performing the operation for each of these ruptures respectively, with your management of the contents of the hernial sac, under the various conditions in which they may be found, giving your subsequent treatment from stage to stage according to the symptoms, which you think are likely to arise up to a successful or fatal termination; you may refer to any operations for Herniæ which you may have seen performed.



*WEDNESDAY, December 7.*

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MEDICINE.

*Examiners, Dr. BILLING and Dr. TWEEDIE.*

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*MORNING, 10 to 1.*

1. Describe the principal organic diseases of the stomach, including the anatomical characters and diagnostic symptoms of each.

2. Enumerate the varieties of Erysipelas. Describe the progress of erysipelas of the head. Sketch the general principles of treatment of erysipelas, mentioning the more important circumstances to be kept in view in determining the measures to be adopted in particular cases.

*AFTERNOON, 3 to 6.*

1. Mention the various ways in which strangulation of a portion of intestine may be produced. What symptoms would lead you to infer that this lesion existed?

2. What measures would you adopt in a sudden apoplectic seizure? State the circumstances that would induce you to entertain a favourable or an unfavourable opinion of the issue of the case; and should it terminate fatally, describe the morbid appearances you would expect to find.

THURSDAY, December 8.

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MIDWIFERY.

*Examiner, Dr. RIGBY.*

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MORNING, 10 to 1.

1. What are the rules which you would give a patient during the first half of her pregnancy for avoiding premature expulsion, who had already miscarried in two or three previous pregnancies?
2. Enumerate the species of Puerperal Convulsions, their symptoms and treatment.
3. Describe the conditions and forms under which Asphyxia neonatorum occurs, and the treatment.

AFTERNOON, 3 to 6.

1. What are the species of Menorrhagia, their causes and treatment?
2. Describe the modifications and varieties of Menstruation arising from peculiar habit, mode of life, climate, &c.
3. What are the symptoms of Prolapsus Uteri, and its effects upon the neighbouring parts?

## CANDIDATES.

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The following Candidates passed the Examinations, and have consequently been admitted to the Degree of DOCTOR OF MEDICINE.

### *First Division.*

|                              | Medical Schools.    |
|------------------------------|---------------------|
| *MILLER, WILLIAM ALLEN ..... | King's College.     |
| PALEY, WILLIAM .....         | London Hospital.    |
| †QUAIN, RICHARD .....        | University College. |
| UNWIN, DAVID .....           | University College. |

### *Second Division.*

PURVIS, PRIOR .....

St. Thomas's Hospital.

- \* A Certificate of Special Proficiency in Medicine was awarded to Dr. Miller.  
 † A Certificate of Special Proficiency in Medicine and a Gold Medal for a Commentary on a Case in Medicine were awarded to Dr. Quain.

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## EXAMINATION FOR HONOURS.

### MEDICINE.

QUAIN, RICHARD ..... (*Gold Medal*).... University College.

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